

CHOKING (ADULTS) A Learning Brief

Choking is a serious concern in care settings, where residents are particularly vulnerable due to agerelated changes (the elderly) and other health factors (those with mental health / learning disabilities)

While choking may seem like an isolated event, it is surprisingly common in care settings where individuals face unique challenges related to age, medical conditions, cognitive decline and limited care facilities which can heighten risk and lead to severe injury or death if not responsibly managed.

The risks associated with choking are significant, ranging from breathing difficulties to aspiration pneumonia and even death. Understanding why choking is more prevalent in these settings is crucial for preventing incidents and ensuring residents' safety.

CHOKING IS A PREVENTABLE BUT SERIOUS RISK.

Several high-profile cases of choking in care homes have highlighted the dangers of inadequate supervision and staff training.

In one instance, a resident with known dysphagia choked on a piece of meat because the staff failed to follow their care plan, which required a pureed diet. The resident tragically died as staff were not trained in emergency choking procedures.

Another case involved a dementia patient who was left unsupervised during a meal and choked on bread, resulting in severe brain damage due to a lack of oxygen.

Ensure the Four Key Risk Factors for Choking are considered for everyone:

Age: Those over 65 face higher risks.

Note any difficulty swallowing, coughing while eating, pocketing food in mouth, **Swallowing Abilities:**

loss of liquid/food from mouth before swallowing. Assess gag reflex.

Consider referring patients for swallow evaluations.

Oral Health Factors: Check for poor dental health, missing teeth, ill-fitting dentures, dry mouth.

All increase chances of choking.

Medical History: Focus on stroke, dementia, Parkinson's, cerebral palsy, developmental

disabilities.

Also note medications that cause dry mouth as they reduce swallow safety.





















Key Learning

Dysphagia Screening

- Routine assessments should take place which identify swallowing issues and enable care plans to be regularly reviewed and updated.
- ✓ Ensure assessments, monitoring & review of individual's needs and risks are consistent with the care actually provided.
- ✓ ALL STAFF SHOULD BE AWARE OF UPDATES

Personalised Care Plans and Risk Assessments

- ✓ Unique to the individual's needs
- ✓ Specify food textures, liquid thickness, and use of feeding aids.
- √ Take account of capacity and executive function
- ✓ Include the person's voice and family where appropriate.
- Ensure use / referral to a person's individualised assessment which would be issued once choking/ nutritional risks are identified (with SALT)

To address choking risks, settings must:

- √ Implement comprehensive dysphagia screening,
- ✓ Maintain supervision during meals.
- ✓ Encourage involvement of family with meal times, ensuring they are also aware of the person's needs
- ✓ Create a calm and distraction free dining environment
- Preparing meals that meet Individual's specific dietary can significantly reduce the likelihood of choking incidents.
- ✓ Ensure there is appropriate supervision during meal times which will help prevent hurried eating and reduce choking risk.
- ✓ For residents with cognitive decline, such as dementia, the psychological effects of memory loss can lead to improper eating behaviours. They may forget to chew food thoroughly or fail to recognise potential choking hazards.
- ✓ Addressing psychological factors through gentle encouragement and supervision can help alleviate fear and reduce choking risks in vulnerable residents.

Commissioners will:

- Ensure there is appropriate provision for individuals experiencing longstanding, fluctuating and ongoing mental health issues.
- ✓ Evaluate the care actually provided corresponds to the care contracted for.
- Consider and balance the care provided on trust with the need to assure compliance with care regulations

Staff Training

- ✓ Ensure staff are trained in first aid, Heimlich manoeuvre, and dysphagia care.
- ✓ Ensure the training of care staff is NOT generic BUT is specifically tailored to reflects the needs / risks of each individual who needs support due to their differing needs as they will follow different pathways
- ✓ The training should also account for any specific risks identified and is evaluated on inspection.

Things To Consider

- ✓ Are you aware of the Care Plan and is it up to date?
- ✓ Are there any safeguarding concerns do you know how to report them and to whom?
- ✓ How do you manage family, friends and visitors being involved at meal times?
- ✓ Do know who should be supervised when eating and does this happen?
- √ Have you been trained in emergency choking first aid is this up to date?

Resources

- Choking Risk Assessment: Important things you must consider <a>2
- Dysphagia and people with learning disabilities GOV.UK
- Issue 6: Caring for people at risk of choking Care Quality Commission
- LN005751.pdf Easy Read, Supporting People with Eating and Drinking
- The IDDSI Standard Standards IDDSI





















